NON-PATENT LITERATURE

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File 155:MEDLINE(R) 1951-2006/Jun 07
         (c) format only 2006 Dialog
File
       5:Biosis Previews(R) 1969-2006/Jun W1
         (c) 2006 The Thomson Corporation
File 73:EMBASE 1974-2006/Jun 08
         (c) 2006 Elsevier Science B.V.
File 94:JICST-EPlus 1985-2006/Mar W1
         (c)2006 Japan Science and Tech Corp(JST)
File 144: Pascal 1973-2006/May W2
         (c) 2006 INIST/CNRS
File 162:Global Health 1983-2006/May
         (c) 2006 CAB International
File 164:Allied & Complementary Medicine 1984-2006/Jun
          (c) 2006 BLHCIS
File 467:ExtraMED(tm) 2000/Dec
         (c) 2001 Informania Ltd.
File 34:SciSearch(R) Cited Ref Sci 1990-2006/May W4
         (c) 2006 Inst for Sci Info
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
         (c) 1998 Inst for Sci Info
                Description
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S1
S2
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                IMPLANT? OR INJECT? OR IMBED? OR EMBED?
                LUMEN OR LUMENS OR LUMINA OR LUMINAL OR (ANNULAR OR CONSTR-
S3
       252189
             ICTION OR CONSTRICTING) () MUSCLE? ?
S4
       731919
                PASSAGE? OR CAVITY OR CAVITIES
S5
      1909643
                SPHINCTER? ? OR ESOPHAG??? OR GASTROESOPHAG??? OR INTESTIN-
             ?? OR URETHRA? ? OR PHARYNX OR PHARYNGEAL
S6
        14660
                (FORCE OR PRESSURE) () (SENSOR OR SENSORS OR SENSING OR DETE-
             CTOR? ? OR DETECTING)
                ELECTROMAGNET? OR ELECTRO() MAGNET??
S7
       436197
S8
                RING OR RINGS OR CIRCLE? ? OR RADIAL?? OR CIRCULAR OR ENCI-
      1450710
             RCL???
S9
      1665059
                CONSTRICT? OR RESTRICT? OR SQUEEZ? OR NARROW???
S10
      1753753
                COMPRESS? OR CONTRACT? OR TIGHT?
S11
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                S1(S)S2(S)S3:S5
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                (S1(3N)S2)(5N)S3
S13
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S14
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                S13(S)S3
                S13(S)S4:S5
S15
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S16
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                S14:S15
S17
           92
                RD
                    (unique items)
S18
            6
                S17/2003
                S17/2004
S19
            3
S20
           13
                S17/2005
S21
           1
                S17/2006
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                S17 NOT S18:S21
S22
S23
           12
                S9:S10 AND S22
                S22 AND S6:S8
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S25
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S26
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S27
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S28
           45
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           45
                Sort S28/ALL/PY, A
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25/7/1 (Item 1 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

05589158 PMID: 7280943

Clinical applications of magnetic rings in colorectal anastomosis.

Jansen A; Brummelkamp W H; Davies G A; Klopper P J; Keeman J N

Surgery, gynecology & obstetrics (UNITED STATES) Oct 1981, 153 (4)

p537-45, ISSN 0039-6087--Print Journal Code: 0101370

Publishing Model Print

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: MEDLINE; Completed

Based upon experiments on animals, an anastomotic apparatus, consisting of two magnetic rings of polymer bonded, rare earth cobalt magnets embedded in polyester, was developed. There are three types of polyester device with diameters of 25, 28, and 30 millimeters, respectively. The force between the magnets varied between 2.5 Newtons at 4 centimer separation and 11.8 Newtons at union. For the low colorectal anastomosis, a magnet holder, connecting rod and spherical cap were developed. The aim of the technique is a quick restoration of the underbroken submucosal intestinal cylinder by optimal circular apposition of the submucosal layer. The working mechanism is based upon progressive compression , leading to necrosis of the intermediate mucosal and submucosal layers by increasing the magnetic intestinal healing takes place. After seven to 12 days, the force while magnets cut through the disappear from the anastomotic region by intestinal peristalsis. From the initial series of 21 patients, 11 resections of the sigmoid colon and nine low anterior resections were performed. Dehiscence of the suture line was noted in two instances. One patient required reoperation. The other patient had a small area of dehiscence at the suture line after evacuation of an infected hematoma with a further uncomplicated course. One patient died on the third postoperative day of recurrent myocardial infarction. In the other 18 patients, primary intestinal healing was demonstrated roentgenologically and sigmoidoscopically.

Record Date Created: 19811122
Record Date Completed: 19811122

25/7/10 (Item 10 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

12585313 PMID: 10619964

A magnetic device for increasing the urethral resistance to flow: an experimental study in female dogs.

Ali-El-Dein B; El-Demerdash R; Kock N G; Ghoneim M A

Urology & Nephrology Centre, University of Mansoura, Egypt.

BJU international (ENGLAND) Jan 2000, 85 (1) p150-4, ISSN 1464-4096

--Print Journal Code: 100886721

Publishing Model Print

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: MEDLINE; Completed

OBJECTIVE: To test a new magnetic device for increasing the urethral resistance to flow in a dog model, and thus provide a potential mechanical

device for the treatment of incontinence in women. MATERIALS AND METHODS: The study comprised 12 female mongrel dogs; three dogs were used to study the effect on urethral resistance of inserting a vaginal magnet (control experiment) and five were assessed in a urodynamic study. With the animals under general anaesthesia, the bladder and the urethra were exposed by a low midline incision. One magnet , embedded in a silicon layer, was placed on the anterior side of the urethra 3 cm distal to the bladder neck and fixed with a few sutures. To increase the urethral resistance as required, a second magnet was inserted into the vagina and the device activated. Urethral pressure profiles and leak-point pressures were recorded in the anaesthetized animals under resting conditions and after urethra was compressed between the magnets. Recordings were also made after pharmacological blockade of the urethral musculature. In four additional dogs, chronic experiments were conducted to evaluate the effect of continuous compression of the urethra and the vaginal wall for 14 days. RESULTS: Urethral compression between the magnets resulted in a doubling of the maximal pressure in the proximal urethra and in a threefold increase of the leak-point pressure. After pharmacological denervation of the urethra the differences between the control pressures and those after activating the device were even greater, although not significantly so. After 2 weeks of continuous compression of the vaginal wall and the urethra between the magnets there was no detectable tissue damage. CONCLUSION: These results suggest that the magnetic device can pressure and that prolonged compression efficiently increase urethral caused no apparent damage to the urethra or vagina. It may therefore be a useful potential method of providing urinary continence in women.

Record Date Created: 20000224
Record Date Completed: 20000224

25/7/11 (Item 11 from file: 34)

DIALOG(R)File 34:SciSearch(R) Cited Ref Sci

(c) 2006 Inst for Sci Info. All rts. reserv.

10820305 Genuine Article#: 571FL Number of References: 125

Title: Electrical stimulation for the treatment of bladder dysfunction: Current status and future possibilities

Author(s): Jezernik S (REPRINT) ; Craggs M; Grill WM; Creasey G; Rijkhoff NJM

Corporate Source: Swiss Fed Inst Technol, Swiss Fed Inst Technol, Automat Control Lab, Phys Str 3, ETL K 28/CH-8092 Zurich//Switzerland/ (REPRINT); Swiss Fed Inst Technol, Swiss Fed Inst Technol, Automat Control Lab, CH-8092 Zurich//Switzerland/; Univ Coll London, Neurospinal Res Ctr, Stanmore/Middx/England/; Royal Natl Orthopaed Hosp, Stanmore HA7 4LP/Middx/England/; Case Western Reserve Univ, Dept Biomed Engn, Cleveland//OH/44106; Louis Stokes Cleveland Dept Vet Affairs Med Ctr, Cleveland//OH/; Univ Aalborg, Ctr Sensory Motor Interact, Dept Med Informat & Image Anal, Aalborg//Denmark/

Journal: NEUROLOGICAL RESEARCH, 2002, V24, N5 (JUL), P413-430

ISSN: 0161-6412 Publication date: 20020700

Publisher: FOREFRONT PUBL GROUP, C/O MARY J RAWLINS, 5 RIVER RD, STE 113, WILTON, CT 06897 USA

Language: English Document Type: REVIEW

Abstract: Electrical stimulation of peripheral nerves can be used to cause muscle contraction, to activate reflexes, and to modulate some functions of the central nervous system (neuromodulation). If applied to the spinal cord or nerves controlling the lower urinary tract,

electrical stimulation can produce bladder or **sphincter contraction**, produce micturition, and can be applied as a medical treatment in cases of incontinence and urinary retention. This article first reviews the history of electrical stimulation applied for treatment of bladder dysfunction and then focuses on the **implantable** Finetech-Brindley stimulator to produce bladder emptying, and on external and **implantable** neuromodulation systems for treatment of incontinence. We conclude by summarizing some recent research efforts including: (a) combined sacral posterior and anterior sacral root stimulator **implant** (SPARSI), (b) selective stimulation of nerve fibers for selective detrusor activation by sacral ventral root stimulation, (c) microstimulation of the spinal cord, and (d) a newly proposed closed-loop bladder neuroprosthesis to treat incontinence caused by bladder overactivity.

27/7/1 (Item 1 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

03924718 PMID: 1126293

[Colostomy continence achieved with an implanted circular magnet (author's transl)]

Kontinente Kolostomie durch Magnetverschluss

Feustel H; Henniq G

Deutsche medizinische Wochenschrift (1946) (GERMANY, WEST) May 9 1975,

100 (19) p1063-4, ISSN 0012-0472--Print Journal Code: 0006723

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: GERMAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

A new method of providing a colostomy continent for faeces and gas is described. It consists of the subcutaneous implantation of a magnetic ring which is led outside through the lumen of the colon and sutured to the skin. The colostomy is closed with a magnetic cover. The procedure has been used in 17 patients with a permanent colostomy after rectal excision and has been highly successful.

Record Date Created: 19750807 Record Date Completed: 19750807

27/7/2 (Item 2 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

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06020855 PMID: 6218687

[Controllable colostomy following abdomino-peritoneal extirpation of the rectum]

Upravliaemye kolostomy u bol'nykh, perenesshikh briushno-promezhnostnuiu ekstirpatsiiu priamoi kishki.

Fedorov V D; Rykov V I; Obariuk T S; Amelin V M; Blagodarnyi L A

Voprosy onkologii (USSR) 1983, 29 (1) p30-4, ISSN 0507-3758--Print Journal Code: 0413775

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: RUSSIAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

Abdominoperineal extirpation of the rectum and formation of a controlled artificial sphincter were performed in 74 cases, following research conducted in 1978-1981. An artificial sphincter was formed from a fascial-muscular flap of musculus adductor magnus of the thigh in 35 cases; a magnetic ring was implanted in 39 cases. Indications for both surgical procedures and technical details are discussed. The good long-term functional results point to the effectiveness of the said procedures of surgical rehabilitation of cases of extirpation of the rectum.

Record Date Created: 19830317
Record Date Completed: 19830317

27/7/11 (Item 11 from file: 5)

DIALOG(R) File 5:Biosis Previews(R)

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0012671704 BIOSIS NO.: 200000390017

Transintegumental power transformers with high permeability cores

AUTHOR: Melvin David (Reprint); Henderson H Thurman; Helmicki Arthur J

AUTHOR ADDRESS: Cincinnati, OH, USA**USA

JOURNAL: Official Gazette of the United States Patent and Trademark Office

Patents 1231 (5): Feb. 29, 2000 2000

MEDIUM: e-file ISSN: 0098-1133

DOCUMENT TYPE: Patent RECORD TYPE: Abstract LANGUAGE: English

ABSTRACT: Extra- to intra-corporeal power is provided by a transformer implanted at least partially within a defunctionalized intestinal pouch (or sack), such as an ileal pouch. The transformer includes a continuous loop magnetic core which is implanted within the pouch. The pouch itself includes a passageway permitting the secondary wiring to extend around the and through the magnetic core and through its central opening without entering the pouch providing intracorporeal current. Wire providing the primary windings extend from outside the body in through a stoma into the pouch and surround portions of the magnetic core within the pouch. Because of the use of a generally continuous loop magnetic core of high permeability, there is little or virtually no magnetic flux leakage. A solid circular core of a high permeability material may be used. In an alternate embodiment of the present invention the magnetic core can be divided into two separate portions, one implanted within the pouch and one implanted within the peritoneum adjacent the pouch so that the two core portions combine to form a generally continuous loop magnetic path, separated only by the intestinal wall of the pouch.

29/7/3 (Item 3 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

06152851 PMID: 6887423

A magnetic urethral closure device: preliminary report of an experimental study.

Gruneberger A D; Hennig G R

Journal of urology (UNITED STATES) Oct 1983, 130 (4) p798-801,

ISSN 0022-5347--Print Journal Code: 0376374

Publishing Model Print

Document type: Journal Article

Languages: ENGLISH
Main Citation Owner: NLM

Record type: MEDLINE; Completed

The new magnetic urethral closure system consists of a retropubically implanted magnet and another removable intravaginal magnet, thus gently closing the urethra. The device has shown its proper function in 12 sheep during a period of observation of up to 33 weeks. There were no technical defects. The pressure on the tissue can be modulated by the size and strength of the removable magnet and the pressure action time can easily be limited to the actual needs of the patient. Necrosis of the vagina wall and urethra have not been observed, using smooth-edged magnets.

Record Date Created: 19831028 Record Date Completed: 19831028

29/7/4 (Item 4 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

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06352254 PMID: 6538609

A magnet system for urethral closure in females.

Gruneberger A D; Hennig G R; Bullemer F

Journal of biomedical engineering (ENGLAND) Apr 1984, 6 (2) p102-6, ISSN 0141-5425--Print Journal Code: 7906074

Publishing Model Print

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: MEDLINE; Completed

The magnetic/urethral-closure system consists of a retropubically implanted magnet, fixed to the inner rim of the symphysis pubica, and an intravaginal magnet which, by their mutual attraction, close the urethra. Magnetic force/distance characteristics of rare earth/cobalt magnets used for this purpose have been investigated with distances similar to those to be expected with the system in situ. Experiments on excised sheep urethra and bladder have shown proper function of the closure system up to a urethral pressure of more than 120 cm H2O. The system has also been tested in vivo in 16 Merino sheep.

Record Date Created: 19840522 Record Date Completed: 19840522

29/7/6 (Item 6 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

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06665242 PMID: 3984560

[Selection of the treatment method in rectal cancer]

Die Auswahl der Behandlungsmethode beim Rektumkarzinom.

Fedorov V D

Zentralblatt fur Chirurgie (GERMANY, EAST) 1985, 110 (2-3) p98-107, ISSN 0044-409X--Print Journal Code: 0413645

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: GERMAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

From 1956 to 1982, 4126 patients suffering from rectal cancer underwent

Serial 10/612325 June 8, 2006

surgery, 3229 of them had radical operations. The total postoperative mortality rate came up to 7.1% (n = 295) in the radical operated group it was 6.6% (n = 214). Between 1956 to 1982 continence preserving surgical procedures were constantly on the increase 1956: 46.4%, 1982: 66.8%). In 160 patients who underwent exstirpation of the rectum with final colostomy a closing magnetic device was implanted around the colostomy. 40 patients who underwent a rectal pull through had a myoplastic operation to substitute a new anal sphincter using a portion of the adductor longus femoris muscle. Preoperative X-ray therapy (2000-3000 rad in 5 days) in 217 patients with rectal carcinoma yielded no significant improvement of the 5 years survival rate.

Record Date Created: 19850501 Record Date Completed: 19850501

29/7/7 (Item 7 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

07388013 PMID: 3603896

[Development of a magnetic urethral closure and initial clinical experiences]

Entwicklung eines magnetischen Urethralverschlusses und erste klinische Erfahrungen.

Gruneberger A D

Der Urologe. Ausg. A (GERMANY, WEST) May 1987, 26 (3) p106-11,

ISSN 0340-2592--Print Journal Code: 1304110

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: GERMAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

The new magnetic closure device consists of a retropubically implanted magnet and another removable intravaginal magnet, which gently closes the urethra. The system has shown its proper function in animal experiments up to an urethral pressure of 120 cm water pressure and in an animal model - female merino sheep - during a period of observation up to 33 weeks. The first experiences with a magnetic urethral closure system in female patients with recurrent urinary incontinence, when common incontinence surgery is useless (no descensus, extremely hypotone urethral), are promising. Continence can be achieved, the handling is easy and can be managed by intelligent and well motivated patients. The system has been used successfully in 7 patients carrying the magnet in the vagina over 8 h daily for up to 3 years.

Record Date Created: 19870730
Record Date Completed: 19870730

29/7/9 (Item 9 from file: 155)

DIALOG(R) File 155:MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

07674394 PMID: 3361765

[Implantation of a perineal magnetic closing device in the absence of the anal sphincter]

Implantatsiia promezhnostnogo megnitnogo zapiraiushchego ustroistva pri otsutstvii zhoma zadnego prokhoda.

Salamov K N; Dul'tsev Iu V; Protsenko V M; Egorkin M A; Markova E V

Khirurgiia (USSR) Feb 1988, (2) p122-6, ISSN 0023-1207--Print

Journal Code: 0412765 Publishing Model Print

Document type: Journal Article

Languages: RUSSIAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed Record Date Created: 19880602 Record Date Completed: 19880602

29/7/11 (Item 11 from file: 155)

DIALOG(R)File 155:MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

07995002 PMID: 2914527

Treatment of patients with rectal cancer.

Fedorov V D; Shelygin Y A

Research Institute of Proctology, Moscow, USSR.

Diseases of the colon and rectum (UNITED STATES) Feb 1989, 32 (2)

p138-45, ISSN 0012-3706--Print Journal Code: 0372764

Publishing Model Print

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: MEDLINE; Completed

During a 20-year period (1965 to 1985), 4673 patients with rectal cancer underwent surgical treatment, with 3500 of them being subjected to radical surgery. Postoperative mortality was 6.1 percent. During the last five years, the mortality rate decreased dramatically down to 4.9 percent, despite an increase in the group of elderly patients (35.7 percent) and performance of a considerable percentage of simultaneous, extensive, and combined operations (33.7 percent). The trend of employing sphincter-saving operations (in more than 60 percent of patients, the anterior resection and abdominoanal resection with a pull-through were performed) accounts for the favorable five-year survival rate (62 to 69 percent) and results in a good functional outcome in 80 percent of patients. The use of a combination of conservative and operative methods of rehabilitation contributes to the professional readaptation of 75 to 80 percent of patients after surgery with construction of a stoma. In 223 cases, a Soviet magnetic occlusive device was implanted , while in 67 patients an artificial sphincter
mechanism was constructed from the flap of the adductor longus femoris muscle. It should be emphasized that surgical methods of rehabilitation are used both in primary and reconstructive operations. The experience with management of 124 patients with recurrent cancer after resection and extirpation of the rectum shows that local excision or repeated resections of the rectum cure 20 to 29 percent of those operated on.

Record Date Created: 19890321
Record Date Completed: 19890321

29/7/14 (Item 14 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

09048205 PMID: 1761176

[Modification of the use of a magnetic device for urethral occlusion in recurrent incontinence]

June 8, 2006

Modifikation der Anwendung der Magnetschale des Harnrohrenverschlusses bei Rezidiv-Inkontinenz.

Gruneberger A D

Kreiskrankenhaus Wangen.

Geburtshilfe und Frauenheilkunde (GERMANY) Oct 1991, 51 (10) p850-2, ISSN 0016-5751--Print Journal Code: 0370732

Publishing Model Print

Document type: Case Reports; Journal Article ; English Abstract

Languages: GERMAN
Main Citation Owner: NLM
Record type: MEDLINE; Completed

The magnetic closure device consists of a bow-shaped retropubically implanted magnet. Another removable magnet is situated in the vagina, thus gently closing the urethra. The modification described herein consists of colposuspension over the upper edge of the implanted magnet. Continence was thus achieved. The use of the intravaginal magnet was not necessary. The case report deals with the first two patients.

Record Date Created: 19920210
Record Date Completed: 19920210

29/7/22 (Item 22 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

09740670 PMID: 8368032

[Development of a magnetic urethral closure device--an animal experiment study]

Entwicklung eines magnetischen Urethralverschlusses--eine tierexperimente lle Studie.

Gruneberger A D; Hennig G R

Zentrum fur Gynakologie und Geburtshilfe, Universitat Ulm und Munchen-Gauting.

Zentralblatt fur Gynakologie (GERMANY) 1993, 115 (7) p328-31, ISSN 0044-4197--Print Journal Code: 21820100R

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: GERMAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

The new magnetic closure device consists of a retropubically implanted magnet and another removable intravaginal magnet, which gently closes the urethra. This system has shown its proper function in Merino sheep during a period of observation up to 33 weeks. The pressure on the tissue can be adjusted by the size and strength of the removable magnet. By using smooth-edged magnets, no necrosis of the vaginal wall and urethra could be observed.

Record Date Created: 19931007
Record Date Completed: 19931007

29/7/26 (Item 26 from file: 155)

DIALOG(R) File 155:MEDLINE(R)

(c) format only 2006 Dialog. All rts. reserv.

10037476 PMID: 8174918

[Magnetic closure with colposuspension in complicated recurrent incontinence]
Magnetverschluss mit Kolposuspension bei komplizierter Rezidivinkontinenz.

Gruneberger A D

Gynakologisch/Geburtshilfliche Abteilung, Krankenhauses Wangen/Allgau. Geburtshilfe und Frauenheilkunde (GERMANY) Feb 1994, 54 (2) p80-3, ISSN 0016-5751--Print Journal Code: 0370732

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: GERMAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

The magnetic sphincter consists of a bow shaped retropubical implanted magnet , fixed on the inner rim of the symphysis. Another removable magnet is installed in the vagina, both gently closing the urethra . 31 patients with severe recurrent stress incontinence after repeated operations (hypotone urethra mean=17 cm H2O upp rest, mean=59 years) were operated on with the magnetic sphincter system. 16 patients have been operated with this method, getting a curing rate of 12.4 continent patients do not use to vaginal magnet because of complaints. This system has now been modified. The modification described herein consists of a colposuspension over the upper edge of the implanted magnet. With this modification, 12 of the patients became continent, 10 resulting from the colposuspension alone, 2 became adequately continent with the additional intravaginal magnet. The idea of a colposuspension over the upper edge of the magnetic implant is convincing by its success in recurrent stress incontinence, and gives the possibility to increase the continence rate by using the intravaginal magnet. The operation is easy to perform and the result effective.

Record Date Created: 19940606
Record Date Completed: 19940606

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File 357:Derwent Biotech Res. _1982-2006/Jun W1
         (c) 2006 The Thomson Corp.
File 358:Current BioTech Abs 1983-2006/Jan
          (c) 2006 DECHEMA
      2:INSPEC 1898-2006/May W4
File
         (c) 2006 Institution of Electrical Engineers
File
       6:NTIS 1964-2006/May W3
         (c) 2006 NTIS, Intl Cpyrght All Rights Res
File
      8:Ei Compendex(R) 1970-2006/May W4
         (c) 2006 Elsevier Eng. Info. Inc.
File 65:Inside Conferences 1993-2006/Jun 07
         (c) 2006 BLDSC all rts. reserv.
File 431:MediConf: Medical Con. & Events 1998-2004/Oct B2
         (c) 2004 Dr. R. Steck
Set
        Items Description
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S1
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       641095 IMPLANT? OR INJECT? OR IMBED? OR EMBED?
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         6976 LUMEN OR LUMENS OR LUMINA OR LUMINAL OR (ANNULAR OR CONSTR-
             ICTION OR CONSTRICTING) () MUSCLE? ?
S4
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             ?? OR URETHRA? ? OR PHARYNX OR PHARYNGEAL
                (FORCE OR PRESSURE) () (SENSOR OR SENSORS OR SENSING OR DETE-
S6
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             CTOR? ? OR DETECTING)
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               RING OR RINGS OR CIRCLE? ? OR RADIAL?? OR CIRCULAR OR ENCI-
S8
      648575
            RCL???
      452825 CONSTRICT? OR RESTRICT? OR SQUEEZ? OR NARROW???
S9
S10
      668181 COMPRESS? OR CONTRACT? OR TIGHT?
S11
         977 S1(S)S2(S)S3:S5
S12
         365 S11(S)S6:S10
         112 (S1(3N)S2)(S)S3:S5
S13
          88 RD (unique items)
S14
           1 S14/2003
S15
           1
               S14/2004
S16
           8 S14/2005
S17
S18
           2 S14/2006
S19
          76 S14 NOT S15:S18
          27 S19 AND S6:S10
S20
          27
               Sort S20/ALL/PY, A [not relevant]
S21
S22
          49
               S19 NOT S20
                (S3 OR S5 OR S4(5N)(BODY OR PATIENT? ?))(S)S22
S23
23/7/7
          (Item 5 from file: 2)
DIALOG(R) File
               2:INSPEC
(c) 2006 Institution of Electrical Engineers. All rts. reserv.
          INSPEC Abstract Number: A83009778
Title: A magnet-system for treatment of female urinary incontinence
 Author(s): Gruneberger, A.D.; Hennig, G.; Bollemer, F.
 Author Affiliation: Ulm Univ., Ulm, West Germany
 Journal: Biomedizinische Technik
                                    vol.27, no.10
 Publication Date: Oct. 1982 Country of Publication: West Germany
 CODEN: BMZTA7 ISSN: 0013-5585
                     Document Type: Journal Paper (JP)
 Language: German
 Treatment: New Developments (N); Practical (P)
 Abstract: A new magnetic urethral -closure system is described
```

consisting of a magnet retropubically implanted and fixed to the symphysis pubica and an intravaginal magnet thus closing the urethra in between. Magnetic force-distance characteristics of samarium-cobalt-magnets have been investigated over the distances that the magnets act on the urethra in situ. The experiments showed proper functioning of the closure system up to a urethral pressure of 120 cm H/sub 2/0. (22 Refs) Subfile: A

23/7/8 (Item 1 from file: 6)

DIALOG(R) File 6:NTIS

(c) 2006 NTIS, Intl Cpyrght All Rights Res. All rts. reserv.

2257372 NTIS Accession Number: ADA409550/XAB

New Magnetic Device for the Identification of Endotracheal Tube Position (Conference paper)

Pan, W.; Lou, J.; Zhang, Y. T.; Jin, X.

Zhejiang Univ., Hangzhou (China).

Corp. Source Codes: 072049000; 425728

25 Oct 2001 5p Languages: English

Journal Announcement: USGRDR0311

Papers from the 23rd Annual International Conference of the IEEE Engineering in Medicine and Biology Society, October 25-28, 2001, held in Istanbul, Turkey. See also ADM001351 for entire conference on cd-rom.

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NTIS Prices: PC A01/MF A01 Country of Publication: China

A new device for **detect**ing the position of endotracheal tube is presented in this paper. This device consists of a high sensitive linear Hall- effect **sensor** and a newly designed endotracheal tube in which two small **magnets** are **embedded**. The Hall-effect **sensor** can be placed on the skin of neck over the vocal cord to **detect** the position of endotracheal tube by measuring the strength of its **magnet**ic field when the **magnet** on tube passes through the glottis during intubation. The results of our clinical tests on 38 cases of endotracheal intubation and 15 controls of **esophageal** intubation how that the device is sensitive to verify the **esophageal** intubation, and that it provides a useful means for clinician to control the inserted length easily. Due to its unique principle of operation, the **detect**or can be applied to all kinds of patients, especially in pre-hospital sites.

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File 149:TGG Health&Wellness DB(SM) 1976-2006/May W3
         (c) 2006 The Gale Group
File 148:Gale Group Trade & Industry DB 1976-2006/Jun 07
         (c) 2006 The Gale Group
File 16:Gale Group PROMT(R) 1990-2006/Jun 07
         (c) 2006 The Gale Group
File 160:Gale Group PROMT(R) 1972-1989
         (c) 1999 The Gale Group
File
       9:Business & Industry(R) Jul/1994-2006/Jun 06
         (c) 2006 The Gale Group
File 635:Business Dateline(R) 1985-2006/Jun 07
         (c) 2006 ProQuest Info&Learning
File 636: Gale Group Newsletter DB (TM) 1987-2006/Jun 06
         (c) 2006 The Gale Group
File 129:PHIND(Archival) 1980-2006/May W4
         (c) 2006 Informa UK Ltd
File 135:NewsRx Weekly Reports 1995-2006/May W4
         (c) 2006 NewsRx
Set
        Items
                Description
                MAGNET OR MAGNETS OR MAGNETIC() (PARTICLES OR POWDER) OR MA-
S1
        70473
             GNETI?ABLE OR MAGNETI?ED
S2
       904158
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S3
                LUMEN OR LUMENS OR LUMINA OR LUMINAL OR (ANNULAR OR CONSTR-
        20023
             ICTION OR CONSTRICTING) () MUSCLE? ?
S4
         4454
                (PASSAGE? OR CAVITY OR CAVITIES) (5N) (BODY OR PATIENT? ?)
S5
                SPHINCTER? ? OR ESOPHAG??? OR GASTROESOPHAG??? OR INTESTIN-
        72227
             ?? OR URETHRA? ? OR PHARYNX OR PHARYNGEAL
S6
        10339
                (FORCE OR PRESSURE) () (SENSOR OR SENSORS OR SENSING OR DETE-
             CTOR? ? OR DETECTING)
S7
        55941
                ELECTROMAGNET? OR ELECTRO() MAGNET??
                RING OR RINGS OR CIRCLE? ? OR RADIAL?? OR CIRCULAR OR ENCI-
S8
       837946
             RCL???
S9
                CONSTRICT? OR RESTRICT? OR SQUEEZ? OR NARROW???
      1431632
S10
      5419079
                COMPRESS? OR CONTRACT? OR TIGHT?
S11
               (S1(3N)S2)(10N)S3:S5
            2
                S1(S)S2(S)S3:S5
S12
           18
S13
                S6:S10(S)S12
            7
S14
            5
                S13 NOT S11
S15
            3
                RD (unique items)
S16
           11
                S12 NOT (S11 OR S13)
S17
            7
                RD (unique items)
S18
            7
                Sort S17/ALL/PD, A
```

DIALOG(R) File 160:Gale Group PROMT(R) (c) 1999 The Gale Group. All rts. reserv.

(Item 1 from file: 160)

(c) 1999 The Gale Group. All rts. reserv. 00328625

Magnetic medicine: Small magnetic 'bullets' implanted in an 18-mo old boy born with a congenital defect--an incompletely formed esophagus--enabled surgeons to finally cure the defect.

Technology Review February, 1976 p. 21

The tiny magnets were implanted in each end of his incomplete esophagus, initially several cm apart, and the boy was placed in an intermittent electromagnetic field. The magnets gradually stretched the two ends until they were close enough for the surgeons to join them. This magnetic technique may also help cure other defects, such as imperforate anus.

```
(Item 2 from file: 149)
 15/3,K/2
DIALOG(R) File 149:TGG Health Wellness DB(SM)
(c) 2006 The Gale Group. All rts. reserv.
            SUPPLIER NUMBER: 11492580
                                         (USE FORMAT 7 OR 9 FOR FULL TEXT)
Dynamic graciloplasty for treatment of faecal incontinence.
Baeten, C.G.M.I.; Konsten, J.; Spaans, F.; Visser, R.; Habets, A.M.M.C.;
Bourgeois, I.M.; Wagenmakers, A.J.M.; Soeters, P.B.
The Lancet, v338, n8776, p1163(3)
Nov 9, 1991
PUBLICATION FORMAT: Magazine/Journal ISSN: 0099-5355 LANGUAGE: English
RECORD TYPE: Fulltext; Abstract TARGET AUDIENCE: Professional
                     LINE COUNT: 00182
WORD COUNT:
             1659
...ABSTRACT: different causes. The physical causes of fecal incontinence
include spinal cord damage, damage to the sphincter muscle, congenital
abnormalities of the anus, and removal of the sphincter as a part of
treatment for cancer. One proposed treatment for fecal incontinence that is
...from its normal site of attachment and wrapped around the rectum, either
at the normal sphincter site or at the new site if the patient has had a
new anus created surgically. Tightening of this muscle closes the opening
and restores continence. Unfortunately, this leg muscle is of the type
physiologists call rapid twitch; the gracilis is designed to contract
rapidly and powerfully, but is less suited to sustained contraction and
tires easily. In an attempt to solve the problem of fatique, researchers
have now...
...complete fecal incontinence; in addition to the relocation of the
muscle, an electrical stimulator was implanted that would maintain the
tension of the muscle, and hence the continence, without any voluntary...
...patient. The electrical stimulator utilizes a magnetic switch; when the
patient wishes to defecate, a magnet is held near the implanted
stimulator, turning it off and relaxing the surgically created sphincter .
In eight of the 10 patients who received this treatment, continence was
restored immediately. Two...
       to an external stimulator; at this site intramuscular electrodes
('SP 5528', Medtronic, Kerkrade, Netherlands) were implanted . The
electrodes were then tunnelled to the lower abdomen and connected with an
implantable stimulator ('Itrel 7420', Medtronic, Minnesota, USA), which
was placed in a subcutaneous pocket. The muscle was activated immediately
after implantation , with intermittent mode electrical stimulation for 8
weeks. The pulse width was 210 [microsec], frequency...
...with telemetry. This procedure can be regarded as an "in-service
training" of the new sphincter . The output of the electrical stimulator
and thus the tonic contractions of the new sphincter could be switched
"off" with a magnet to allow defaecation at a convenient time...
```

15/3,K/3 (Item 1 from file: 16)
DIALOG(R)File 16:Gale Group PROMT(R)
(c) 2006 The Gale Group. All rts. reserv.
02831830 Supplier Number: 43807645
Pacemaker-like Implant Helps Control Incontinence
Medical World News, p14
May, 1993
Language: English Record Type: Abstract

Document Type: Magazine/Journal; Professional ABSTRACT:

...fecal incontinence has been developed by Dr Massimo Seccia of the U of Pisa. The implant is used to control a muscle transplanted from the thigh to replace a malfunctioning sphincter. The Implantable Pulse Generator (IPG) can make the muscle contract with something under 3 volts. The device must be turned off to let the muscle relax in order to defecate. The IPG is switched on an off with an external magnet. The device has been tested successfully in 14 of 15 attempts. Patients who may not...
...frequency range to hear a static produced by the device when it is on. The implant has a battery that lasts 5 years...

18/3,K/3 (Item 3 from file: 149)

DIALOG(R) File 149:TGG Health&Wellness DB(SM)

(c) 2006 The Gale Group. All rts. reserv.

01372364 SUPPLIER NUMBER: 12902666 (USE FORMAT 7 OR 9 FOR FULL TEXT)

Electrically stimulated gracilis sphincter for treatment of bladder sphincter incontinence.

Janknegt, R.A.; Baeten, C.G.M.I.; Weil, E.H.J.; Spaans, F.

The Lancet, v340, n8828, p1129(2)

Nov 7, 1992

PUBLICATION FORMAT: Magazine/Journal ISSN: 0099-5355 LANGUAGE: English

RECORD TYPE: Fulltext; Abstract TARGET AUDIENCE: Professional

WORD COUNT: 1744 LINE COUNT: 00150

ABSTRACT: Reconstruction of the bladder **sphincter** using electrically-stimulated gracilis muscle may restore continence in patients suffe**ring** from complete urinary incontinence...

...thigh, is attached surgically to the neck of the bladder and is stimulated by an **implanted** electrode turned off and on by a **magnet**. Among three patients with complete urinary incontinence who underwent surgery, continence was restored in two...

...risk of infection may be lower in these patients than in those with an artificial **sphincter implanted** in their bladder.

AUTHOR ABSTRACT: Correction of total urinary incontinence due to sphincter damage is done with an artificial sphincter prosthesis or urinary diversion. In this pilot study we used graciloplasty around the bladder neck followed by electrical stimulation of this muscle with an implanted stimulator, which could be switched off and on by a magnet. Stimulus variables could be changed externally. With the stimulator on, urethral pressures of about 50 cm [H.sub.O] were obtained. Of three patients who underwent...

18/3,K/4 (Item 4 from file: 636)

DIALOG(R) File 636: Gale Group Newsletter DB (TM)

(c) 2006 The Gale Group. All rts. reserv.

02417692 Supplier Number: 44801330 (USE FORMAT 7 FOR FULLTEXT)

Market and Technology Updates

The BBI Newsletter, v27, n7, pN/A $\,$

July, 1994

Language: English Record Type: Fulltext

Document Type: Newsletter; Trade

Word Count: 1165

... as patient transport. TREK is also waiting for 510(k) approval of its On-Command magnet -based male retention/urinary incontinence

indwelling catheter and anticipates a mid-1994 launch. The On...
...catheter features a check valve that prevents the flow of urine until a matchbook-sized magnet is placed next to the penis, allowing the flow of urine. The catheter is placed within the urethra and may be left for up to 30 days. Studies have shown the On-Command...

...assays includes those used for therapeutic drug monitoring, metabolic, cardiovascular, pregnancy, fertility and thyroid testing. Implantable Device Treats Epilepsy CYBERONICS (Webster, TX) has received approval to market in the European Community (EC), its implantable vagus nerve stimulation device for treating epilepsy. In the 12 EC countries combined, more than...

...vagus nerve stimulation using CYBERONICS' NeuroCybernetic prosthesis (NCP) system. The NCP system consists of an **implantable** pulse signal generator and a stimulation lead that is surgically attached to the left vagus...

...stimuli that can trigger epileptic seizures and possibly other neurologic disorders. NCP systems have been <code>implanted</code> in more than 250 patients in the U.S., Europe and Japan. On-demand Therapy...
...and 1997. BBI's Report #1205, "U.S. Markets for High-Tech Cardiac Devices and <code>Implants</code>," published December 1993, is available. Contact the BBI Sales Department, (714) 755-5757; fax (714...

18/3,K/5 (Item 5 from file: 149)

DIALOG(R) File 149:TGG Health&Wellness DB(SM)

(c) 2006 The Gale Group. All rts. reserv.

01605201 SUPPLIER NUMBER: 17623503 (USE FORMAT 7 OR 9 FOR FULL TEXT)

Towards even fewer colostomies....(Commentary)

Banerjee, Anjan; Shorthouse, Andrew

The Lancet, v346, n8979, p859(1)

Sept 30, 1995

PUBLICATION FORMAT: Magazine/Journal ISSN: 0099-5355 LANGUAGE: English

RECORD TYPE: Fulltext TARGET AUDIENCE: Professional

WORD COUNT: 983 LINE COUNT: 00079

Sphincter preservation is therefore largely replacing **sphincter** excision for cancer of the mid and lower rectum, and also for ulcerative colitis and...

...techniques has led to a reduction in the formation of permanent stomas.[8] However, where **sphincter** excision is unavoidable, or in cases of anal agenesis, creation of a neo-**sphincter** is the next logical step. Whilst adductor longus,[9] gluteus maximus,[10] and obturator internus... ...until Williams and co-workers[13] transposed the gracilis muscle to the anus, with the **implantation** of stimulating electrodes, that results improved; this procedure led to the transformation of fast-twitch... ...the anal canal and fixed to the ischial spine. 6 weeks later, intramuscular electrodes are **implanted** at the site of nerve entry and connected through a subcutaneous tunnel to a neurostimulator controlled by an external **magnet**, which is placed in the abdominal wall...

FOREIGN AND INTERNATIONAL PATENTS

```
File 350:Derwent WPIX 1963-2006/UD, UM &UP=200636
         (c) 2006 The Thomson Corp.
File 347: JAPIO Dec 1976-2005/Dec (Updated 060404)
         (c) 2006 JPO & JAPIO
Set
        Items Description
                MAGNET OR MAGNETS OR MAGNETIC() (PARTICLES OR POWDER) OR MA-
S1
       282465
             GNETI?ABLE OR MAGNETI?ED
                IMPLANT? OR INJECT? OR IMBED? OR EMBED?
S2
       845664
                LUMEN OR LUMENS OR LUMINA OR LUMINAL OR (ANNULAR OR CONSTR-
S3
        18428
             ICTION OR CONSTRICTING) () MUSCLE? ?
S4
        47684
                (PASSAGE? OR CAVITY OR CAVITIES) (5N) (BODY OR PATIENT? ?)
S5
        30818
                SPHINCTER? ? OR ESOPHAG??? OR GASTROESOPHAG??? OR INTESTIN-
             ?? OR URETHRA? ? OR PHARYNX OR PHARYNGEAL
S6
        76613
                (FORCE OR PRESSURE) () (SENSOR OR SENSORS OR SENSING OR DETE-
             CTOR? ? OR DETECTING)
S7
       292223
                ELECTROMAGNET? OR ELECTRO() MAGNET??
S8
      1375264
                RING OR RINGS OR CIRCLE? ? OR RADIAL?? OR CIRCULAR OR ENCI-
             RCL???
S9
       452175 CONSTRICT? OR RESTRICT? OR SQUEEZ? OR NARROW???
      1016250 COMPRESS? OR CONTRACT? OR TIGHT?
S10
S11
                S1(S)S2(S)S3:S5
           66
                S11(S)S9:S10
S12
           6
           15 S11 AND S6:S8
S13
           15 S13 NOT S12
S14
           11 S3:S5/TI AND S11
S15
S16
           6 S15 NOT S12:S13
S17
           39 S11 NOT S12:S16
         1713
                S9:S10(3N)S3:S5
S18
S19
           2
                S1(5N)S2 AND S18
S20
                S19 NOT S11
 12/3/1
            (Item 1 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
            **Image available**
017473632
WPI Acc No: 2005-797311/200581
  Urethral occlusive assembly used for preventing urinary incontinence in
  males and females, includes implant component including flexible bridge
  member connecting two opposed implant supports, and external component
Patent Assignee: NOVATEK MEDICAL LLC (NOVA-N); NOVA TEK MEDICAL LLC
  (NOVA-N)
Inventor: ANDERSON D W; TIMM G W
Number of Countries: 110 Number of Patents: 002
Patent Family:
Patent No
             Kind
                     Date
                             Applicat No
                                            Kind
                                                   Date
                                                            Week
WO 2005110281 A2 20051124
                             WO 2005US15971 A
                                                 20050506 200581 B
US 20050267324 A1 20051201 US 2004569420
                                             P
                                                  20040507 200581
                             US 2004600613
                                           Р
                                                 20040811
                             US 2005122827
                                             Α
                                                 20050505
Priority Applications (No Type Date): US 2005122827 A 20050505; US
  2004569420 P 20040507; US 2004600613 P 20040811
International Patent Class (Main): A61F-002/04
```

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June 8, 2006
 12/3, K/3
              (Item 3 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
013610040
WPI Acc No: 2001-094248/200111
XRAM Acc No: C01-027945
  Magnetic controller of incontinence consists of a permanent magnet system
  attracting a ferromagnetic material, made as an implant
Patent Assignee: IBARRA GARCIA M R (GARC-I)
Number of Countries: 001 Number of Patents: 002
Patent Family:
Patent No
              Kind Date
                             Applicat No
                                           Kind
                                                  Date
                                                           Week
              A1 20001201 ES 9970
ES 2150875
                                            Α
                                                19990111
                                                          200111 B
              B1 20010816 ES 9970
ES 2150875
                                            Α
                                                19990111 200158
Priority Applications (No Type Date): ES 9970 A 19990111
Patent Details:
Patent No Kind Lan Pq
                       Main IPC
                                    Filing Notes
ES 2150875
                 1 A61F-002/48
             A1
ES 2150875
             В1
                     A61F-002/48
Abstract (Basic):
           The magnetic controller of incontinence comprises an implant
    serving as a urethral sphincter enhancing compression . A
    permanent magnet attracts a ferromagnetic material, to eliminate
    incontinence.
 12/3, K/4
              (Item 4 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
010967028
            **Image available**
WPI Acc No: 1996-463977/199646
  Implantable urethral sphincter for occluding urethral in human being -
  removes external magnet from skin over implant to allows bellows to
  expand, thus opening urethral cuff
Patent Assignee: WHALEN BIOMEDICAL INC (WHAL-N)
Inventor: SARRASIN M J; WHALEN R L
Number of Countries: 001 Number of Patents: 001
Patent Family:
Patent No
             Kind
                   Date
                            Applicat No
                                         Kind
                                                  Date
US 5562598
             Α
                  19961008 US 94309144
                                           A 19940920 199646 B
Priority Applications (No Type Date): US 94309144 A 19940920
Patent Details:
Patent No Kind Lan Pg
                        Main IPC
                                    Filing Notes
US 5562598
             Α
                    8 A61F-002/02
... Abstract (Basic): The device includes An external magnet for achieving
    closure of the urethral cuff. A hydraulically operated silicone
    rubber sphincter cuff. The device also includes a connecting tube,
   and an elastomeric bellows assembly. The device is closed by an
   external magnet placed on the skin over the implanted reservoir
   assembly. When the external magnet is in place the elastomeric
   bellows of the reservoir is compressed , and the prosthetic sphincter
    is closed. Removal of the external magnet from the skin over the
```

implant allows the bellows to expand, thus opening the urethral cuff...

ASRC Searcher: Jeanne Horrigan Serial 10/612325 June 8, 2006

DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

004320887

WPI Acc No: 1985-147765/198525

XRAM Acc No: C85-064246 XRPX Acc No: N85-111490

Implanted valve for urethra - comprises elastomer sleeve contg. normally closed slit to be opened by pressure

Patent Assignee: ESKA MED & KUNSTSTO (ESKA-N); KOSS W (KOSS-I)

Inventor: JONAS U

Number of Countries: 005 Number of Patents: 004

Patent Family:

Patent No Kind Date Applicat No Kind Date Week EP 144699 19850619 EP 84112991 Α 19841027 198525 B Α US 4643169 Α 19870217 US 84665107 Α 19841026 198709 EP 144699 19910313 R 199111 DE 3484268 G 19910418 199117

Priority Applications (No Type Date): DE 83U31338 U 19831102

Patent Details:

Patent No Kind Lan Pg Main IPC Filing Notes

EP 144699 A G 28

Designated States (Regional): DE FR GB SE

EP 144699 B

Designated States (Regional): DE FR GB SE

...Abstract (Basic): A valve implant for controlling the urethra in case of incontinence comprises an elastomer sleeve (2) to be fitted around the urethra. This sleeve (1, 2) is of stable form and contains within it, esp. supported by gel cushions (4), a narrow slit (5) which normally keeps the urethra closed. Pressure at top and bottom (3, 6) opens this slit. The pressure can be exerted either manually or by remote control according to the position of the implant. Pref., the sleeve is composed of two half-shells, joined together by a flexible hinge...

...film of the same material, and having their opposite ends (6) sewn together, connected by magnets or otherwise closed...

14/3,K/2 (Item 2 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

017030232 **Image available**
WPI Acc No: 2005-354550/200536

Upper gastrointestinal implant for treating obesity, particularly morbid obesity, has elongate tubular body with proximal and distal ends, funnel opening, and support structure

Patent Assignee: BALLIRO J (BALL-I); CARR-LOCKE D (CARR-I); DANN M (DANN-I); GUTERMAN L (GUTE-I); IKRAMUDDIN S (IKRA-I); KAGAN J (KAGA-I); LEARY J (LEAR-I); THOMAS R (THOM-I)

Inventor: BALLIRO J; CARR-LOCKE D; DANN M; GUTERMAN L; IKRAMUDDIN S; KAGAN
 J; LEARY J; THOMAS R

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No Kind Date Applicat No Kind Date Week
US 20050096750 A1 20050505 US 2002422987 P 20021101 200536 B

US 2002428483 P 20021122 US 2002430857 P 20021203

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US 2002437513 P 20021230

US 2003448817 P 20030221

US 2003480485 P 20030621

US 2003698148 A 20031031

US 2004998424 A 20041129
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Priority Applications (No Type Date): US 2004998424 A 20041129; US 2002422987 P 20021101; US 2002428483 P 20021122; US 2002430857 P 20021203; US 2002437513 P 20021230; US 2003448817 P 20030221; US 2003480485 P 20030621; US 2003698148 A 20031031

Patent Details:

Patent No Kind Lan Pg Main IPC US 20050096750 A1 106 A61F-002/04

Filing Notes

Provisional application US 2002422987 Provisional application US 2002428483 Provisional application US 2002430857 Provisional application US 2002437513 Provisional application US 2003448817 Provisional application US 2003480485 Cont of application US 2003698148

Abstract (Basic): US 20050096750 A1

NOVELTY - An upper gastrointestinal implant comprises an elongate tubular body having a proximal end and a distal end; a funnel opening on the proximal end; and a support structure spaced distally apart from the proximal end. It is dimensioned such that the proximal end is positioned in between an antrum and a lower esophageal sphincter when the support structure is positioned in the antrum.

...(5) a method of positioning a tubular **implant** within an **intestine** of a patient, comprising providing the elongate tubular body having a proximal end, a distal end and a first **magnet** secured to the distal end; trans-**esophageally** introducing the distal end into the stomach; advancing the distal end into the pylorus; and advancing the distal end from the pylorus into the **intestine**, where at least the advancing step is accomplished using a second **magnet** external to the patient.

International Patent Class (Main): A61F-002/04

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14/3/3 (Item 3 from file: 350)
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DIALOG(R) File 350: Derwent WPIX

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016531656

WPI Acc No: 2004-690222/200467

Device useful for engaging or compressing a body lumen comprises a first layer containing electroactive polymer, and second layer

Patent Assignee: HEGDE A V (HEGD-I); KARABEY H I (KARA-I); PAVAD MEDICAL INC (PAVA-N)

Inventor: HEGDE A V; KARABEY H I; HEDGE A V

Number of Countries: 108 Number of Patents: 002

Patent Family:

Patent No Kind Date Applicat No Kind Date Week WO 200478025 A2 20040916 WO 2004US4820 A 20040218 200467 B US 20040230090 A1 20041118 US 2002416477 P 20021007 200477

US 2003451212 P 20030228 US 2003681821 A 20031007 US 2004781357 A 20040217

Priority Applications (No Type Date): US 2004781357 A 20040217; US 2003451212 P 20030228; US 2003681821 A 20031007; US 2002416477 P 20021007

```
(Item 6 from file: 350)
 14/7/6
DIALOG(R) File 350: Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
004423207
WPI Acc No: 1985-250085/198541
  Tampon for artificial intestine outlet - with permanent magnet pin
  housed in blind hole of plug to cooperate with implanted magnetic ring
Patent Assignee: LEHR A VD (VLEH-I); LEHR A (LEHR-I)
Inventor: LEHR A
Number of Countries: 001 Number of Patents: 002
Patent Family:
Patent No
             Kind
                   Date
                             Applicat No
                                            Kind
                                                  Date
DE 3410715
              Α
                  19851003 DE 3410715
                                            Α
                                                19840323
                                                          198541 B
DE 3410715
              С
                   19920507 DE 3410715
                                            Α
                                                19840323 199219
Priority Applications (No Type Date): DE 3410715 A 19840323
Patent Details:
Patent No Kind Lan Pg
                        Main IPC
                                    Filing Notes
DE 3410715
             Α
                    10
DE 3410715
              C
Abstract (Basic): DE 3410715 A
        A tampon for closing the outlet of an artificial intestine
    compries a longitudinal central bore for housing a permanent magnet
    pin to cooperate with an implanted magnetic ring . The bore has the
    form of a blind hole. Pref., it extends to within 15 mm of the proximal
    end (inner end) of the tampon. This proximal end may be fitted with a
    rounded closure cap, esp. centered by a stud and fixed by adhesive.
        USE/ADVANTAGE - As a tampon for an artificial intestine outlet.
    Such tampons are designed to be entirely handled by the wearer, and
    this includes changing of the tampon and therefore insertion of the
    magnetic pin into a new tampon. With the arrangement described, there
    is no risk of the pin coming out and causing serious injury.
        0/1
Abstract (Equivalent): DE 3410715 C
       A tampon for closing the outlet of an artificial intestine
    compries a longitudinal central bore for housing a permanent magnet
    pin to cooperate with an implanted magnetic ring . The bore has the
    form of a blind hole. Pref., it extends to within 15 mm of the proximal
    end (inner end) of the tampon. This proximal end may be fitted with a
    rounded closure cap, esp. centered by a stud and fixed by adhesive.
       USE/ADVANTAGE - As a tampon for an artificial intestine outlet.
    Such tampons are designed to be entirely handled by the wearer, and
    this includes changing of the tampon and therefore insertion of the
   magnetic pin into a new tampon. With the arrangement described, there
    is no risk of the pin coming out and causing serious injury. (10pp
    Dwg.No.0/1
```

14/7/9 (Item 9 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
002246619

International Patent Class (Additional): A61F-005/44; A61F-013/20;

Derwent Class: D22; E12; P32; P34

A61L-015/00

Serial 10/612325 June 8, 2006

WPI Acc No: 1979-45815B/197925

Magnetic plug for closing prosthetic bowel outlet - is magnetic ring

-and-plug assembly in polyvinyl acetal foam, hydrophobic, casing Patent Assignee: TEMCA CHEM UNION GM (TEMC-N); VD LEHR A (VLEH-I)

Inventor: FIEDLER H: LEHR A

Number of Countries: 008 Number of Patents: 009

Patent Family:

Pat	tent No	Kind	Date	Applicat	No	Kind	Date	Week	
DE	2754807	Α	19790613					197925	В
SE	7806217	Α	19790709					197930	
FR	2410999	Α	19790810					197938	
GB	1592543	Α	19810708					198128	
CH	627072	Α	19811231					198206	
DE	2754807	C	19820311					198211	
CA	1119754	Α	19820316					198215	
AT	7802899	Α	19820415					198218	
JP	54086997	Α	19790710					198635	

Priority Applications (No Type Date): DE 2754807 A 19771209

Abstract (Basic): DE 2754807 A

Magnetic closure for an artificial intestinal outlet comprises a ring magnet implanted at the outlet, with which a permanently or temporarily magnetic plug is associated. The plug is exchangeably fitted into an open-cellular polyvinylacetal foam envelope whose inner surfae has been rendered hydrophobic wiht a silicone.

The closure can be **implant**ed in alignment with a user's abdominal wall and affords a hygienically unimpeachable device of prolonged reliable efficacy

Derwent Class: A96; P32

International Patent Class (Additional): A61F-001/00; A61F-005/44

14/7/10 (Item 10 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

002128190

WPI Acc No: 1979-E8121B/197922

Abdominal body opening sealing member - has in-line magnets lying axially on either side of body magnet

Patent Assignee: COLOPLAST INT A/S (COLO-N)
Inventor: LARSEN H O; SAERENSEN E L; WOLFF P

Number of Countries: 002 Number of Patents: 003

Patent Family:

Patent No Kind Date Applicat No Kind Date Week GB 2007983 A 19790531 197922 B US 4258705 A 19810331 198116 GB 2007983 В 19820623 198225

Priority Applications (No Type Date): GB 7846862 A 19781201; GB 7737836 A 19770910

Abstract (Basic): GB 2007983 A

To provide in an artificial intestinal or urethral opening (12) in an abdominal wall, a resilient sealing member (21) is held in place by magnetic forces. A ring or ring -link segmental magnet (14) is implanted in the body (10) around the opening. The member contains two or more magnets (37-39) in line.

The in-line magnets, when axially straddling the ring magnet, prevent tilting of the member. Two magnets in line have their pole

orientation identical. If three magnets are used, one is reversed.

Derwent Class: P31; P32

International Patent Class (Additional): A61B-019/00; A61F-005/44

14/7/11 (Item 11 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

001682923

WPI Acc No: 1977-B9396Y/197710

Bladder outlet valve for incontinent people - has magnet cone embedded in magnet ring seat with powerful external opening magnet

Patent Assignee: HENNIG G (HENN-I)

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No Kind Date Applicat No Kind Date Week
DE 2537506 A 19770303 197710 B

Priority Applications (No Type Date): DE 2537506 A 19750822

Abstract (Basic): DE 2537506 A

The bladder outlet valve is magnetically controlled for incontinent people. The valve seat (2) is implanted inside the bladder (1) near the mouth of the urethra (3) and is rigidly fixed to the inner wall of the bladder. A spherical, conical or leaf shaped valve body (4) rests on the valve seat (2) and contains a permanent or soft magnet (5) attracted to at least one other ring magnet (b) which is embedded in the valve seat (2), keeping the valve closed. A very strong external magnet (7) is used to open the valve.

The permanent magnetic material used ahas a specific energy value of at least 100 mw/cm3 and a retentivity of at least 4000 A/cm: The bladder valve involves insertion of only a minimum of foreign material directly inside the bladder and the valve seat can be made e.g. of tissue-compatible silicone

Derwent Class: P32

International Patent Class (Additional): A61F-001/00

14/7/12 (Item 12 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

001327168

WPI Acc No: 1975-M1096W/197545

Colostomy or ileostomy aperture closing device - has nearby permanent magnet working with other magnets closing aperture

Patent Assignee: HENNIG G (HENN-I)

Number of Countries: 005 Number of Patents: 006

Patent Family:

Patent No Kind Date Applicat No Kind Date Week FR 2255044 Α 19750822 197545 B 19750818 DK 7406655 Α 197545 SE 7505093 A 19760315 197615 DE 2447682 A 19760408 197616 DE 2447682 В 19770608 197724 IT 1058300 B 19820410 198230

Priority Applications (No Type Date): DE 2447682 A 19741007; DE 2363563 A

19731220; GB 7436341 A 19740819; DE 2537573 A 19750822

Abstract (Basic): FR 2255044 A

The device is for use by a patient having an artificial anus, and incorporates one or more permanent magnets for mounting in the area of the intestinal aperture, working with one or more other magnets or soft magnetic components to close it. The permanent magnet can be of the annular type, or a set of magnets in a ring pattern, fixed to the inside of the abdominal wall round the intestine, while a mating component of ferrous material of suitable dimensions is attached to a disposable sack or a sealing hood. The implanted magnetic portion can be encased in silicon, polyethylene, or any other material acceptable to human tissue.

Derwent Class: P32

International Patent Class (Additional): A61F-005/44

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16/7/3
            (Item 3 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
007253106
WPI Acc No: 1987-250113/198735
 Magnetic artificial anus with sphincter function - has flexible
  structure giving added security of operation
Patent Assignee: MEITO SANGYO KK (MEIT ); ODAJIMA H (ODAJ-I)
Inventor: YAMAGUUGHI T
Number of Countries: 006 Number of Patents: 002
Patent Family:
Patent No
             Kind
                   Date
                            Applicat No
                                           Kind
                                                 Date
                                                           Week
                  19870827 WO 87JP119
WO 8704918
              Α
                                            Α
                                                19870224
                                                          198735 B
US 4904256
                  19900227 US 87130382
              Α
                                            Α
                                                19871020 199015
Priority Applications (No Type Date): JP 8637448 A 19860224
Cited Patents: DE 2363563; DE 2447682; DE 2754807; DK 139335; DK 665574; FR
  2255044; FR 2410999; GB 1471158; GB 1592543; JP 51022296; JP 54086997; SE
  7505093; SE 7806217; US 3952726
Patent Details:
Patent No Kind Lan Pg
                        Main IPC
                                    Filing Notes
             A J 12
WO 8704918
  Designated States (National): DK US
  Designated States (Regional): DE FR GB SE
Abstract (Basic): WO 8704918 A
```

The magnetic artificial anus with sphincter function comprises an annular bag structure (1) made of biocompatible flexible material filled with magnetic fluid and a plug structure (2) made of magnetic material and complete with a cap (2') and a stem portion .

In use, the annular bag is implanted between fascia (8) and peritoneum (9) so as to surround the artificial anus wall (3) into which the plug structure is inserted. The combination of flexible structure and magnetic sphincter function provides a level of security not available in the conventional hard magnet versions.

1/5

Abstract (Equivalent): US 4904256 A

The implantable magnetic artificial anus has sphincter functions comprising a flexible annular hollow bag formed of a bioaffinitive flexible film having a film thickness of 0.1 to 0.5 mm and filled with a magnetic fluid. A plug member has in combination a cylindrical body defining upper and lower ends, and an umbrella shaped cap integral with the upper end. The cylindrical body has a permanent magnet and the body has a hollow ventilation chamber extending from

the upper to the lower end.

The ventilation chamber has gas permeating filters disposed at each end and the chamber is filled with gas permeating material. The **annular** bag is disposed about the periphery of a natural or artificial colon and the cylindrical body of the plug member is inserted into the colon directly adjacent the **annular** bag. (8pp

Derwent Class: P32

International Patent Class (Additional): A61F-002/48; A61F-005/44

16/7/4 (Item 4 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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001959147

WPI Acc No: 1978-J8420A/197845

Intestine closing plug with implanted permanent magnet - has envelope made of material which expands under influence of moisture and heat

Patent Assignee: WILLITAL G (WILL-I)

Inventor: HENNIG G

Number of Countries: 001 Number of Patents: 002

Patent Family:

 Patent No
 Kind
 Date
 Applicat No
 Kind
 Date
 Week

 DE 2717608
 A 19781102
 197845 B

 DE 2717608
 C 19851003
 198541

Priority Applications (No Type Date): DE 2717608 A 19770420; DE 2722286 A 19770517

Abstract (Basic): DE 2717608 C

The envelope of the plug is made of a material which expands after it is inserted into the **intestine**. This envelope is pref. made from pressed cellulose. The material can expand due to moisture or heat. Ends of the plug have material which expands more than the material at plug mid length.

The plug expanding envelope can be split diametrically and also at mid length. In this case the plug is enclosed by a covering sock. The magnetic plug is embedded in the centre of the plug.

DE 2717608 A

The envelope of the plug is made of a material which expands after it is inserted into the **intestin**e. This envelope is pref. made from pressed cellulose. The material can expand due to moisture or heat. Ends of the plug have material which expands more than the material at plug midlength.

The plug expanding envelope can be split diametrically and also at midlength. In this case the plug is enclosed by a covering sock. The magnetic plug is embedded in the centre of the plug.

Derwent Class: P32

International Patent Class (Additional): A61F-005/44

16/7/5 (Item 5 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

001956939

WPI Acc No: 1978-J6212A/197844

Intestinal opening magnetic plug - consists of foam plastics sleeve in opening, containing magnet, and magnets embedded near opening
Patent Assignee: COLOPLAST A/S (COLO); COLOPLAST INT A/S (COLO-N); HENNIG

June 8, 2006

G (HENN-I)

Inventor: WILLITAL G

Number of Countries: 002 Number of Patents: 003

Patent Family:

Patent No Kind Date Applicat No Kind Date Week DE 2717607 Α 19781026 197844 B US 4154226 Α 19790515 197922 DE 2717607 В 19800918 198039

Priority Applications (No Type Date): DE 2717607 A 19770420; DE 2722286 A 19770517

Abstract (Basic): DE 2717607 A

The body implant to close an intestinal opening includes permanent magnets (28) embedded near the opening. A foamed plastics cylinder (24), closed one end, is inserted in the opening itself. A cylindrical magnet (14") is then inserted into the interior of the cylinder.

This magnet is pulled into the interior by a draw cord (20) attached to its nose end, the cord passing through a hole through the closed end of the cylinder (24). The sleeve is used once only. The inner magnet has a gas escape hole through it, and is enclosed by a plastics covering

Derwent Class: P31; P32

International Patent Class (Additional): A61B-019/00; A61F-005/44

16/7/6 (Item 6 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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001893484

WPI Acc No: 1978-C2724A/197811

Artificial sphincter - ensures atraumatic usage after implant with clamp featuring cantilever magnet and a flexible core

Patent Assignee: KUZNETSOV M B (KUZN-I)

Inventor: KUZNETSOV M V; LIVSHITS A V; STEPANOV L V Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No Kind Date Applicat No Kind Date Week SU 558672 A 19770624 197811 B

Priority Applications (No Type Date): SU 2318408 A 19760126

Abstract (Basic): SU 558672 A

The artificial **sphincter** for the restoration of volitional control of urination ensures a traumatic operation immediately after this **implantation**. The clamp is in the form of a yoke with cantilever ends carrying permanent **magnets** (2). The latter are interconnected by the flexible **magnet**ic core (3) which holds the control winding (4).

The size of the elastic yoke (1) and of magnets (2) is selected to ensure two stable positions of the clamp when winding (4) is deenergised. In the compressed state the mutual pull of the magnets exceeds the spread force of the yoke (1) so that the urethra is pinched off. In the relaxed position the force of yoke (1) is greater than the pull of the magnets and the urethra is relieved from clamping. A short d.c. pulse in winding (4) trips the clamp from one state to the other one when the sphincter operates like a polarised relay. The pulse is fed from outside by a transmitting coil using a circuit for frequency separation to alter the direction of the magnetising force. Release of the urethra for longer periods reduces the traumatic effect.

The **sphincter** is made up of the elastic yoke (1) with ends featuring permanent **magnets** (2) linked by the flexible **magnet**ic core (3) which holds the control winding (4). The top of the **sphincter** has loops (5) for suturing to the periosteum of the pubic bone. The **sphincter** is **implanted** 15-20 mm. beneath the skin to pinch off the **urethra**

Derwent Class: P31

International Patent Class (Additional): A61B-019/00

17/3/1 (Item 1 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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017752143 **Image available**
WPI Acc No: 2006-263423/200627

XRPX Acc No: N06-225574

Biomechanical micro sensor system for dynamic measuring and recording of tissue motion in physiologic process and surgical procedure, has data processing device which determines magnitude and direction of ciliary body movement

Patent Assignee: UNIV OHIO STATE (OHIS)
Inventor: MC CALLUM G A; ROBERTS C J

Number of Countries: 112 Number of Patents: 001

Patent Family:

Patent No Kind Date Applicat No Kind Date Week WO 200634336 Al 20060330 WO 2005US33802 A 20050921 200627 B Priority Applications (No Type Date): US 2004611828 P 20040921

17/3,K/3 (Item 3 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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016569836

WPI Acc No: 2004-728573/200471

Related WPI Acc No: 2004-226230; 2004-247170; 2004-247171; 2004-269486; 2005-425163

XRAM Acc No: C04-256032 XRPX Acc No: N04-577052

Implant useful for treatment of sleep disordered breathing comprises a biocompatible polymer matrix sized and configured to be implanted in animal tissue and magnetic particles magnetized to a desired polarity; bound with

Patent Assignee: APNEON INC (APNE-N)

Inventor: BOUCHER R; DOELLING E N; JONES L R; LIU J; NELSON L M; STINE G;

DOELLING E; JONES L; NELSON L; BOUCHER R P; STINE J G

Number of Countries: 109 Number of Patents: 004

Patent Family:

the matrix

Patent No Kind Date Applicat No Kind Date Week WO 200484709 A2 20041007 WO 2004US8635 A 20040322 200471 B US 20050004417 A1 20050106 US 2003456164 P 20030320 200504

US 2004806372 A 20040322

EP 1613251 A2 20060111 EP 2004757970 A 20040322 200604

WO 2004US8635 A 20040322

AU 2004224331 A1 20041007 AU 2004224331 A 20040322 200611 Priority Applications (No Type Date): US 2003718254 A 20031120; US 20037166164 B 20030320 AU 2003055

2003456164 P 20030320; US 2003656861 A 20030906; US 2004806372 A 20040322

Patent Details:

Patent No Kind Lan Pg Main IPC Filing Notes

WO 200484709 A2 E 79 A61B-000/00

Designated States (National): AE AG AL AM AT AU AZ BA BB BG BR BW BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE EG ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NA NI NO NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG US UZ VC VN YU ZA ZM ZW

Designated States (Regional): AT BE BG BW CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PL PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW

US 20050004417 A1 A61F-002/04 Provisional application US 2003456164
EP 1613251 A2 E A61F-005/56 Based on patent WO 200484709
Designated States (Regional): AL AT BE BG CH CY CZ DE DK EE ES FI FR GB
GR HU IE IT LI LT LU LV MC MK NL PL PT RO SE SI SK TR
AU 2004224331 A1

AU 2004224331 A1 A61F-005/56 Based on patent WO 200484709 Abstract (Basic):

- one pharyngeal structure or at least one anatomic component within a pharyngeal conduit, responsible for causing airway collapse and increased airway resistance associated with the entire spectrum of obstructive sleep-disordered breathing. The size and configuration of the implanted structures are selected to provide ease and bio-comfort, but to provide sufficient static and...
- ...tissue collapse when imminent. Compared to the prior art continuous positive airway **pressure** machines, the **implants** are not cumbersome to wear and travel with, easier to accept on a social level...
- ...improved long-term compliance rate. The magnetic force systems provide repelling force between opposing tongue magnet (s) and pharyngeal wall magnet (s) having strength sufficient to remodel native tissue conditions within the airway. The repelling force...
- ...the tissue that if left unaltered could lead to tissue collapse during respiratory cycle. The magnets of the implants of the system thus establish tissue conditions that fixate or brace the tissue to resist collapse along the pharyngeal conduit when imminent i.e. during sleep; without significantly stiffening the native tissue at times...
- ...pull the tissue, and without indiscriminate dampening the spring constant of native tissue in the pharyngeal conduit, thus imparts improved comfort, tolerance and bio-acceptance...

17/3,K/13 (Item 13 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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010491529 **Image available**

WPI Acc No: 1995-392930/199550

XRPX Acc No: N95-286472

Magnetically coupled implantable medical device e.g artificial pump for urine or blood - has implantable magnet mounted for rotation by magnetically coupling with external drive magnet and mechanically coupled to implantable medical device e.g blood pump

Patent Assignee: INFLUENCE INC (INFL-N); INFLUENCE MEDICAL TECHNOLOGIES LTD (INFL-N); SRS MEDICAL SYSTEMS INC (SRSM-N)

Inventor: SOHN Z

Number of Countries: 021 Number of Patents: 009

Patent Family:

June 8, 2006

Patent No Kind Date Applicat No Kind Date Week A1 19951109 WO 95US5402 199550 WO 9529716 Α 19950502 19950502 AU 9524646 19951129 AU 9524646 199609 Α Α EP 758254 A1 19970219 EP 95918894 19950502 199713 WO 95US5402 Α 19950502 JP 10504469 W 19980506 JP 95528473 Α 19950502 199828 WO 95US5402 Α 19950502 US 5762599 Α 19980609 US 94236448 Α 19940502 199830 AU 695987 В 19980827 AU 9524646 Α 19950502 199846 JP 3070690 B2 20000731 JP 95528473 Α 19950502 200041 WO 95US5402 Α 19950502 US 94236448 US 6417750 B1 20020709 19940502 Α 200253 US 9812698 Α 19980123 US 99422416 Α 19991021 CA 2189423 С 20020806 CA 2189423 Α 19950502 200260 WO 95US5402 Α 19950502 Priority Applications (No Type Date): US 94236448 A 19940502; US 9812698 A 19980123; US 99422416 A 19991021 Patent Details: Main IPC Patent No Kind Lan Pg Filing Notes WO 9529716 A1 E 34 A61M-001/12 Designated States (National): AU CA JP Designated States (Regional): AT BE CH DE DK ES FR GB GR IE IT LU MC NL PT SE AU 9524646 A61M-001/12 Based on patent WO 9529716 EP 758254 A1 E 34 A61M-001/12 Based on patent WO 9529716 Designated States (Regional): AT BE CH DE DK ES FR GB GR IE IT LI LU MC NL PT SE 53 A61M-001/00 JP 10504469 Based on patent WO 9529716 US 5762599 Α A61M-001/00 AU 695987 В A61M-001/12 Previous Publ. patent AU 9524646 Based on patent WO 9529716 JP 3070690 В2 11 A61M-001/00 Previous Publ. patent JP 10504469 Based on patent WO 9529716 US 6417750 В1 H01H-009/00 Cont of application US 94236448 Cont of application US 9812698 Cont of patent US 5762599 CA 2189423 C E A61M-001/12 Based on patent WO 9529716 ... Abstract (Basic): USE/ADVANTAGE - Artificial pump for implantation in urethra for pumping urine from bladder, for implantation into aorta to pump blood for assisting failing or recovering heart and for implantation into blood vessel to aid blood circulation ischemic leg. Provides flexibility in design and dimensions of implanted driven magnet, and in speed and torque ratios between two magnets.

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17/3,K/21
              (Item 21 from file: 350)
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DIALOG(R) File 350: Derwent WPIX

(c) 2006 The Thomson Corp. All rts. reserv.

001765544

WPI Acc No: 1977-L2059Y/197751

Anal closure with implanted magnet assembly - has plug contg. second magnet assembly in pin shaped attachment

Patent Assignee: COLOPLAST A/S (COLO-N); HENNIG G (HENN-I)

Number of Countries: 001 Number of Patents: 002

Patent Family:

Serial 10/612325 June 8, 2006

 Patent No
 Kind
 Date
 Applicat No
 Kind
 Date
 Week

 DE 2625234
 A 19771215
 197751 B

 DE 2625234
 C 19861002
 198640

Priority Applications (No Type Date): DE 2625234 A 19760604

...Abstract (Basic): Anal closure comprises a first implantable magnet assembly contg. two or more magnet systems (16, 18) which are spaced apart in the longitudinal direction of the intestine. A plug (12) comprises a sealing surface, and a pin shaped attachment contg. a second magnet assembly (22...

17/3,K/22 (Item 22 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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001709495

WPI Acc No: 1977-E5983Y/197722

Filamentary magnetic material body implant - uses platinum cobalt alloy or gold contg. embedded magnetic particles and wound on spool

Patent Assignee: BUCALO L (BUCA-I)

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No Kind Date Applicat No Kind Date Week US 4024855 A 19770524 197722 B

Priority Applications (No Type Date): US 75633015 A 19751118; US 74537572 A 19741230

...Abstract (Basic): magnet particles embedded. The permanent magnet structure (50) can be implanted one side of a body passage (44) and a non-permanent but magnetic material structure (48) on the other side. Normally the attractive force of the permanent magnet structure will hold the passage shut but if the non-permanent magnetic structure is magnetised externally the force of repulsion will open the passage to allow fluid flow.

INVENTORS

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File 350:Derwent WPIX 1963-2006/UD, UM &UP=200636
File 349:PCT FULLTEXT 1979-2006/UB=20060601,UT=20060525
File 348:EUROPEAN PATENTS 1978-2006/ 200622
        Items
               Description
S1
                AU='DEEM M' OR AU='DEEM M E' OR AU='DEEM MARK' OR AU='DEEM
           94
             MARK E'
S2
          209
              AU='GIFFORD H' OR AU='GIFFORD H S' OR AU='GIFFORD H S I':A-
             U='GIFFORD HANSON SMILEY III' OR AU='GIFFORD I H S':AU='GIFFO-
             RD III HANSON SMILEY'
S3
          115
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             AU='ANDREAS BERNARD': AU='ANDREAS BERNHARD H'
                AU='CHEW SUNMI' OR AU='CHEW SUNMI K' OR E3OR E7
S4
           18
S5
           56
                AU='FRENCH R'
S6
                AU='FRENCH RON' OR AU='FRENCH RONALD' OR AU='FRENCH RONALD
             G' OR AU='FRENCH RONALD J' OR AU='FRENCH R G' OR AU='FRENCH R J'
S7
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                AU='SUTTON D'
                AU='SUTTON DOUG' OR AU='SUTTON DOUGLAS' OR AU='SUTTON DOUG-
S8
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             LAS E': AU= 'SUTTON DOUGLAS S'
S9
                AU='SUTTON D E' OR AU='SUTTON D S'
S10
         2434
                IC=A61B-017/08
S11
       631566
               MAGNET?
S12
       109658
               MAGNETIZ? OR MAGNETIS?
S13
      1305556
               LUMEN? ? OR LUMENAL OR LUMINAL OR LUMIN? ? OR SPHINCTER? ?
             OR LES OR URETHRA? ?
               S1:S9 AND S11:S12 AND S13
S14
           11
S15
           1
               S10 AND S14
S16
           11
                IDPAT S14 (sorted in duplicate/non-duplicate order)
S17
                IDPAT S14 (primary/non-duplicate records only)
 17/3,AB,IC/1
                  (Item 1 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
015933368
WPI Acc No: 2004-091209/200409
XRPX Acc No: N04-073055
  Body lumen augmenting method for gastroesophageal reflux disease,
  involves energizing two magnetic devices to constrict lumen , where
  magnetic devices are placed at preselected location in wall of body
  lumen
Patent Assignee: FOUNDRY INC (FOUN-N); ANDREAS B (ANDR-I); CHEW S (CHEW-I);
  DEEM M E (DEEM-I); FRENCH R (FREN-I); GIFFORD H S (GIFF-I); SUTTON D
  (SUTT-I)
Inventor: ANDREAS B ; CHEW S; DEEM M ; FRENCH R ; GIFFORD I H S ;
  SUTTON D ; GIFFORD H S ; DEEM M E
Number of Countries: 106 Number of Patents: 006
Patent Family:
Patent No
             Kind
                    Date
                             Applicat No
                                            Kind
                                                  Date
                                                            Week
WO 200404544
              A2 20040115 WO 2003US21167 A
                                                 20030702 200409 B
US 20040122470 A1 20040624 US 2002393624
                                             Р
                                                  20020702 200442
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AU 2003281342 A1 20040123
                            AU 2003281342
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                                                 20030702
                                                           200459
EP 1517726
              A2
                  20050330 EP 2003742434
                                            Α
                                                 20030702
                                                          200522
                            WO 2003US21167 A
                                                 20030702
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20051027 WO 2003US21167 A
JP 2005532117 W
                                                20030702
                            JP 2004519943 A
                                                20030702
AU 2003281342 A8 20051027 AU 2003281342 A
                                                20030702 200624
Priority Applications (No Type Date): US 2002393624 P 20020702; US
  2003612325 A 20030701
Patent Details:
Patent No Kind Lan Pg
                        Main IPC
                                    Filing Notes
WO 200404544 A2 E 18 A61B-000/00
   Designated States (National): AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA
   CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN
   IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NI NO
   NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG UZ
   VC VN YU ZA ZM ZW
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   GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ
   UG ZM ZW
US 20040122470 A1
                       A61B-017/08
                                    Provisional application US 2002393624
AU 2003281342 A1
                      A61B-000/00
                                    Based on patent WO 200404544
EP 1517726 A2 E
                     A61N-002/00 Based on patent WO 200404544
   Designated States (Regional): AL AT BE BG CH CY CZ DE DK EE ES FI FR GB
   GR HU IE IT LI LT LU LV MC MK NL PT RO SE SI SK TR
JP 2005532117 W
                   13 A61B-017/00 Based on patent WO 200404544
AU 2003281342 A8
                      A61N-002/00
                                    Based on patent WO 200404544
Abstract (Basic): WO 200404544 A2
Abstract (Basic):
       NOVELTY - The method involves inserting a catheter (20) having a
    delivery tube (24) into the body lumen . The catheter is advanced to a
    position such that the delivery tube is near a preselected location.
    Two magnetic devices (26) placed in the delivery tube are implanted
    within a wall of the body lumen at the preselected location. The
    magnetic devices are attracted when energized to constrict the lumen.
       DETAILED DESCRIPTION - An INDEPENDENT CLAIM is also included for a
    device for treating sphincter in the body lumen of a patient.
       USE - Used for treating gastroesophageal reflux disease.
       ADVANTAGE - The attraction between the magnetic devices upon
    energizing constricts the lumen , thereby increasing the tone and
    pressure within the esophagus, thus helping to augment the natural
    function of the lower esophageal sphincter .
       DESCRIPTION OF DRAWING(S) - The drawing shows a frontal,
    cross-sectional view of an esophagus and stomach with magnetic
    particles placed in the wall of the esophagus.
       Esophagus wall (12)
       Stomach (14)
       Catheter (20)
       Delivery tube (24)
        Magnetic devices (26)
       pp; 18 DwgNo 2/3
International Patent Class (Main): A61B-000/00; A61B-017/00; A61B-017/08;
  A61N-002/00
International Patent Class (Additional): A61F-002/02; A61M-037/00
17/3,AB,IC/5
                 (Item 5 from file: 349)
DIALOG(R) File 349: PCT FULLTEXT
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01012107
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ACTIVE PUMP BRONCHIAL IMPLANT AND METHODS OF USE THEREOF POMPE BRONCHIQUE ACTIVE IMPLANTABLE ET METHODES D'UTILISATION

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Patent and Priority Information (Country, Number, Date):

Patent: WO 200341779 A1 20030522 (WO 0341779)

Application: WO 2002US36863 20021114 (PCT/WO US02036863)

Priority Application: US 2001336233 20011114

Parent Application/Grant:

Related by Continuation to: US 2001336233 20011114 (CIP)

Designated States:

(Protection type is "patent" unless otherwise stated - for applications prior to 2004)

AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SI SK SL TJ TM TN TR TT TZ UA UG US UZ VC VN YU ZA ZM ZW

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(AP) GH GM KE LS MW MZ SD SL SZ TZ UG ZM ZW

(EA) AM AZ BY KG KZ MD RU TJ TM

Main International Patent Class (v7): A61M-016/00

Publication Language: English

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Fulltext Word Count: 14225

English Abstract

Disclosed is a pump device that can be implanted into a body passageway, such as into a bronchial passageway. The pump device can be used to pump fluid through the body passageway, such as in order to assist the expiration of fluid from a region of the lung that fluidly communicates with the body passageway. The pump device includes a housing that defines an internal chamber, wherein fluid can flow through the chamber. The housing is dimensioned for insertion into a bronchial passageway. The pump device also includes a fluid propulsion mechanism in fluid communication with the chamber. The fluid propulsion mechanism is positioned to propel fluid through the chamber so as to pump fluid through the bronchial passageway in a desired direction.

17/3,AB,IC/6 (Item 6 from file: 349)
DIALOG(R)File 349:PCT FULLTEXT
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00964092
OBESITY TREATMENT TOOLS AND METHODS

INSTRUMENTS ET METHODES DE TRAITEMENT DE L'OBESITE

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HAN Johney U (et al) (agent), Morrison & Foerster, LLP, 755 Page Mill Road, Palo Alto, CA 94304-1018, US,

Patent and Priority Information (Country, Number, Date):

Patent: WO 200296327 A2 20021205 (WO 0296327)

Application: WO 2002US17077 20020529 (PCT/WO US0217077)
Priority Application: US 2001871297 20010530; US 2002155362 20020523
Designated States:

(Protection type is "patent" unless otherwise stated - for applications prior to 2004)

AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SI SK SL TJ TM TN TR TT TZ UA UG US UZ VN YU ZA ZM ZW

(EP) AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR

(OA) BF BJ CF CG CI CM GA GN GQ GW ML MR NE SN TD TG

(AP) GH GM KE LS MW MZ SD SL SZ TZ UG ZM ZW

(EA) AM AZ BY KG KZ MD RU TJ TM

Main International Patent Class (v7): A61F-005/00

International Patent Class (v7): A61B-017/064; A61B-019/00

Publication Language: English

Filing Language: English Fulltext Word Count: 14550

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File 155:MEDLINE(R) 1951-2006/Jun 07
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File
       5:Biosis Previews(R) 1969-2006/Jun W1
         (c) 2006 The Thomson Corporation
File 73:EMBASE 1974-2006/Jun 08
         (c) 2006 Elsevier Science B.V.
File 34:SciSearch(R) Cited Ref Sci 1990-2006/May W4
         (c) 2006 Inst for Sci Info
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
         (c) 1998 Inst for Sci Info
Set
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S1
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S2
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              MAGNET?
               LUMEN? ? OR LUMINAL OR SPHINCTER OR URETHRA? ? OR CAVITY OR
S3
       708714
             CAVITIES
S4
            4
              S1 AND S2 AND S3
            4 RD (unique items)
S5
S6
          100
               S1 AND S2
S7
               S6 NOT S4
           96
S8
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      1071066
S9
               S2/TI,DE
S10
               S8 AND S9
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                Sort S10/ALL/PY,A [not relevant]
S11
           37
           (Item 1 from file: 5)
 5/7/2
DIALOG(R) File 5:Biosis Previews(R)
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0014307246
            BIOSIS NO.: 200300265890
Obesity treatment tools and methods
AUTHOR: Deem Mark E (Reprint); Sutton Douglas S; Gifford Hanson S;
  Andreas Bernard H ; French Ronald G
AUTHOR ADDRESS: Mountain View, CA, USA**USA
JOURNAL: Official Gazette of the United States Patent and Trademark Office
Patents 1270 (1): May 6, 2003 2003
MEDIUM: e-file
ISSN: 0098-1133 _(ISSN print)
DOCUMENT TYPE: Patent
RECORD TYPE: Abstract
LANGUAGE: English
ABSTRACT: Various obesity treatment tools and methods are described herein,
  as well as treatments for other gastric-related diseases, e.g., GERD.
  Treatment includes reducing the size of the stomach pouch to limit the
  caloric intake as well as to provide an earlier feeling of satiety. This
  may be done by creating a smaller gastric pouch within the stomach
  directly from the interior of the stomach itself. The smaller pouches may
  be made through the use of individual anchoring devices, rotating probes,
  or volume reduction devices. A pyloroplasty procedure may also be
  performed to render the pyloric sphincter incompetent. A gastric bypass
  procedure may additionally be performed using atraumatic magnetic
  anastomoses devices so that sugars and fats are passed directly to the
 bowel while bypassing the stomach. Many of these procedures may be done
  in a variety of combinations. Treatment may create enforced behavioral
  modifications by discouraging the ingestion of high-caloric foods.
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